

AMENDED IN ASSEMBLY MAY 11, 2006

AMENDED IN ASSEMBLY MAY 8, 2006

AMENDED IN ASSEMBLY MAY 3, 2006

AMENDED IN ASSEMBLY APRIL 6, 2006

CALIFORNIA LEGISLATURE—2005–06 REGULAR SESSION

ASSEMBLY BILL

No. 2651

Introduced by Assembly Member Jones

February 24, 2006

An act to amend Sections 124116.5, 124118, 124118.5, and 124119 of the Health and Safety Code, relating to public health.

LEGISLATIVE COUNSEL'S DIGEST

AB 2651, as amended, Jones. Newborns: hearing screening.

(1) The existing Newborn and Infant Hearing Screening, Tracking, and Intervention Act requires that every California Children's Services (CCS)-approved general acute care hospital with licensed perinatal services offer all parents of a newborn, upon birth admission, a hearing screening test for the identification of hearing loss, using protocols approved by the State Department of Health Services or its designee.

This bill would, instead, require that this hearing screening be offered, ~~on and after January 1, 2008~~, to every newborn, by every general acute care hospital with licensed perinatal services, and would make related changes to the program. It would permit certain hospitals to contract for the provision of this service.

(2) Existing law requires the department to establish a system of early hearing detection and intervention centers that, among other

things, are required to approve hospitals on behalf of the department for participation as newborn hearing screening providers.

This bill would repeal that approval requirement. *The bill would provide that its provisions shall become operative on January 1, 2008.*

Vote: majority. Appropriation: no. Fiscal committee: yes.
State-mandated local program: no.

The people of the State of California do enact as follows:

1 SECTION 1. Section 124116.5 of the Health and Safety Code
2 is amended to read:

3 124116.5. (a) (1) Every general acute care hospital with
4 licensed perinatal services in this state shall, ~~on and after January~~
5 ~~1, 2008,~~ administer to every newborn, upon birth admission, a
6 hearing screening test for the identification of hearing loss, using
7 protocols approved by the department or its designee.

8 (2) In order to meet the department's certification criteria, a
9 general acute care hospital shall be responsible for developing a
10 screening program that provides competent hearing screening,
11 utilizes appropriate staff and equipment for administering the
12 testing, completes the testing prior to the newborn's discharge
13 from a newborn nursery unit, refers infants with abnormal
14 screening results, maintains and reports data as required by the
15 department, and provides physician and family-parent education.

16 (b) A hearing screening test provided for pursuant to
17 subdivision (a) shall be performed by a licensed physician,
18 licensed registered nurse, licensed audiologist, or an
19 appropriately trained individual who is supervised in the
20 performance of the test by a licensed health care professional.

21 (c) Every general acute care hospital that has licensed
22 perinatal services that provides care in less than 100 births
23 annually shall, if it does not directly provide a hearing screening
24 test, enter into an agreement with an outpatient infant hearing
25 screening provider certified by the department to provide hearing
26 screening tests.

27 (d) This section shall not apply to any newborn whose parent
28 or guardian objects to the test on the grounds that the test is in
29 violation of his or her beliefs.

30 SEC. 2. Section 124118 of the Health and Safety Code is
31 amended to read:

1 124118. The department or its designee shall provide every
2 general acute care hospital that has licensed perinatal services, or
3 neonatal intensive care unit (NICU), as specified in Section
4 123975, written information on the current and most effective
5 means available to screen the hearing of newborns and infants,
6 and shall provide technical assistance and consultation to these
7 hospitals in developing a system of screening each newborn and
8 infant receiving care at the facility. The information shall also
9 include the mechanism for referral of newborns and infants with
10 abnormal test results.

11 SEC. 3. Section 124118.5 of the Health and Safety Code is
12 amended to read:

13 124118.5. (a) The department shall establish a system of
14 early hearing detection and intervention centers that shall provide
15 technical assistance and consultation to hospitals in the startup
16 and ongoing implementation of a facility screening program and
17 followup system.

18 (b) The early hearing detection and intervention centers shall
19 be chosen by the department according to standards and criteria
20 developed by the California Children's Services Program (CCS).
21 Each center shall be responsible for a separate geographic
22 catchment area as determined by the program.

23 (c) Each center shall be required to develop a system that
24 shall provide outreach and education to hospitals in its catchment
25 area, maintain a database of all newborns and infants screened in
26 the catchment area, ensure appropriate followup for newborns
27 and infants with an abnormal screen including diagnostic
28 evaluation and referral to intervention service programs if the
29 newborn or infant is found to have a hearing loss, and provide
30 coordination with the CCS and local early intervention programs
31 as defined in Title 14 (commencing with Section 95000) of the
32 Government Code.

33 SEC. 4. Section 124119 of the Health and Safety Code is
34 amended to read:

35 124119. (a) The department shall develop and implement a
36 reporting and tracking system for newborns and infants tested for
37 hearing loss.

38 (b) The system shall provide the department with information
39 and data to effectively plan, establish, monitor, and evaluate the
40 Newborn and Infant Hearing Screening, Tracking and

1 Intervention Program, including the screening and followup
2 components, as well as the comprehensive system of services for
3 newborns and infants who are deaf or hard-of-hearing and their
4 families.

5 (c) Every general acute care hospital with licensed perinatal
6 services, or NICU in this state shall report to the department or
7 the department's designee information as specified by the
8 department to be included in the department's reporting and
9 tracking system.

10 (d) All providers of audiological followup and diagnostic
11 services provided under this article shall report to the department
12 or the department's designee information as specified by the
13 department to be included in the department's reporting and
14 tracking system.

15 (e) The information compiled and maintained in the tracking
16 system shall be kept confidential in accordance with Chapter 5
17 (commencing with Section 10850) of Part 1 of Division 9 of the
18 Welfare and Institutions Code, the Information Practices Act of
19 1977 (Chapter 1 (commencing with Section 1798) of Title 1.8 of
20 Part 4 of Division 3 of the Civil Code), and the applicable
21 requirements and provisions of Part C of the federal Individuals
22 with Disabilities Education Act (20 U.S.C. Sec. 1475 et seq.).

23 (f) Data collected by the tracking system obtained directly
24 from the medical records of the newborn or infant shall be for the
25 confidential use of the department and for the persons or public
26 or private entities that the department determines are necessary to
27 carry out the intent of the reporting and tracking system.

28 (g) A health facility, clinical laboratory, audiologist,
29 physician, registered nurse, or any other officer or employee of a
30 health facility or laboratory or employee of an audiologist or
31 physician, shall not be criminally or civilly liable for furnishing
32 information to the department or its designee pursuant to the
33 requirements of this section.

34 *SEC. 5. Sections 1 to 4, inclusive, of this act shall become*
35 *operative on January 1, 2008.*